# Office of Aerospace Medicine Internal Substance Abuse Program (ISAP) Newsletter

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http://faa.gov/avr/aam/isap

### Assessing Prescription Drug Abuse: Four Simple Questions For You and Your Physician

- Have you ever felt the need to cut down on your prescription drugs?
- Have you ever felt annoyed by remarks your friends or loved ones made about your use of prescription drugs?
- Have you ever felt guilty or remorseful about your use of prescription drugs?
- Have you ever used prescription drugs as a way to get going or to calm down?



#### **Prescription Drugs: Roles in Preventing Misuse and Addiction**

Prescription drugs make complex surgery possible, relieve pain for millions of people, and enable many individuals with chronic medical conditions to control their symptoms and lead productive lives. Most people who take prescription medications use them responsibly; however, the nonmedical use of prescription drugs is a serious public health concern. Nonmedical use of prescription drugs can lead to abuse and addiction. Patients, healthcare providers, and pharmacists all have roles in preventing misuse and addiction.

Patients can help prevent prescription drug abuse by providing a complete medical history and description of the reason for the visit to ensure that the doctor understands the complaint and prescribes the appropriate medication. If a doctor prescribes a pain medication, stimulant, or central nervous system depressant, follow the directions for use carefully and learn about the effects that the drug could have, especially during the first few days during which the body is adapting to the medication. Also be aware of potential interactions with other drugs by reading all information provided by the pharmacist. Do not increase or decrease doses or abruptly stop taking a prescription without consulting a health care provider first.

**Pharmacists** play a key role in preventing prescription drug misuse and abuse by providing clear information and advice about how to take a medication appropriately, about the effects the medication may have, and about any possible drug interactions or side effects. Pharmacists can help prevent prescription fraud or diversion by looking for false or altered prescription forms.

**Healthcare Providers** should note any sudden increase in the amount of a medication needed, which may indicate the development of tolerance. They should also be alert to the fact that those addicted to prescription medications may engage in moving from provider to provider in an effect to get multiple prescriptions for their abuse.

Information on this page can be found on the National Institute on Drug Abuse website: <a href="http://www.nida.nih.gov">http://www.nida.nih.gov</a>

#### **True/False Questions**

1. T	F	To help safeguard each urine specimen, a custody and control form is used to document the hand-to-hand transfer and storage of specimens.
2. T	F	A random alcohol test is conducted every time a random drug test is performed.
3. T	F	A screening and confirmation test cannot be conducted on the same Evidential Breath Testing device during testing.
4. T	F	Each FAA alcohol test is conducted using a new Mouthpiece.
5. T	F	The purpose of conducting a split specimen drug testing is to protect the agency.
6. T	F	A positive alcohol test is one with a confirmation value of 0.02.
7. T	F	Breath alcohol concentration levels can be affected by the amount of alcohol you consume over time, gender, and height.



Answers are provided on the following page.

# HHS Proposal for New Technologies and Procedures for Federal Drug Testing Programs

The Substance Abuse and Mental Health Services Administration of the U.S. Health and Human Services (HHS) published two significant documents on April 13, 2004. One captioned "Notice of Proposed Revisions-Mandatory Guidelines for Federal Workplace Drug Testing Programs" proposes to revise and expand the Mandatory Guidelines to include hair, oral fluids, sweat specimen testing. The proposed revision would require certification of Medical Review Officers. It also proposes to lower cutoff levels in urine testing for amphetamine, cocaine and would add methylenedioxymethamphetamine (MDMA) into the testing panel.

The second HHS document a final rule, also relates to the above guidelines. It finalized specimen validity requirements for laboratories to test for adulterated and substituted specimens. The specimen validity rules are in effective on November 1, 2004.

#### Public Comment Period on the Guidelines

HHS requested public comment on all aspects of the Notice of Proposed Revisions--Mandatory Guidelines for Federal Workplace Drug Testing Programs [69 FR 19673].

#### Deadline:

The Public Comment Period Closes on July 12, 2004.

#### Where to Find the Proposal:

www.samhsa.gov/hottopics/click drugtesting.html.

The official Federal Register document can be obtained from the Federal Register website: <a href="www.gpoaccess.gov/fr">www.gpoaccess.gov/fr</a> by identifying the FR document: 69 FR 19673.

#### Where to comment:

You may submit comments identified by FR Doc 04-7984 by any of the following methods:

- E-mail: <a href="wvogl@samhsa.gov">wvogl@samhsa.gov</a>.

  Include docket number and/or RIN number in the subject line of the message.
- Fax: 301-443-3031.
- Mail: 5600 Fishers Lane, Rockwall II, Suite 815 Rockville, Maryland 20852

#### **SAMHSA Report Shows Cost of Addiction Treatment**

A report from the Substance Abuse and Mental Health Services Administration (SAMHSA) calculates that the average cost for treatment of alcohol or other drug addiction in outpatient facilities was \$1,433 per course of treatment in 2002.

The report, "Alcohol and Drug Services Cost Study," concluded that residential treatment cost \$3,840 per admission. For outpatient methadone treatment, the 2002 cost was \$7,415 per admission.

"Treatment is a bargain compared to expenditures for jails, foster care for children, and health complications that often accompany addiction," said SAMHSA Administrator Charles Curie. "Rarely do we have public initiatives that can save society as much as substance abuse treatment and recovery support services. Treatment provides an opportunity for recovery of the individual, better homes for children, and improved safety for our communities."

According to the report, personnel expenses were the single largest component of all costs for all types of treatment. These costs accounted for 63 percent of nonhospital residential care expenses, 65 percent of the expenses of outpatient methadone treatment, and 79 percent of the expenses of outpatient nonmethadone treatment.

The report was based on site visits to 280 facilities nationally, as well as a telephone survey of 2,395 treatment facilities.



## We are pleased to announce a new Division Manager for the Headquarters Internal Substance Abuse Program

James R. Fraser, MD, is the new manager of Medical Specialties Division in the Office of Aerospace Medicine. He began his position at the FAA headquarters on February 23, 2004.

Dr. Fraser is responsible for developing aerospace medicine policies and procedures, administering the medical appellate process, providing oversight of employee drug and alcohol testing, managing and administering psychiatric and medical review officer functions, and providing aerospace medicine expertise and advice to the Federal Air Surgeon.

Dr. Fraser has more than 20 years of professional experience in Aerospace Medicine. He retired from active duty with United States Navy in September 2003.

At the time of his retirement from the Navy, Dr. Fraser was Captain and Command Surgeon, Naval Safety Center, Norfolk, VA. As the Command Surgeon, he was responsible for medical oversight of all Naval Flight Surgeons. Just prior to his retirement, Dr Fraser served as a member of the Columbia Space Shuttle accident investigation board.

Information provided by R. Mark Adams, Division Manager AAM-10

Answers: 1. T 2. F(testing done separately) 3. F(same device used) 4. T 5. F(protects the employee) 6. F (≥ 0.04) 7. T